

## **Sixth Grade EXAMPLE** School/Facility Annual Immunization Survey Worksheet



County:School/Facility Name:													
Certificate Information							Vaccine Specific Information						
0	Date of Birth (MM/DD/YY)	Certificate Expiration Date (MM/DD/YY)	Current/ Provisional Certificate	Medical Exemption	Religious Exemption	No Certificate on File	Tdap	Td Booster	MCV	He	epatitis B	MMR	Varicella
Child ID #							# of doses on record	# of doses on record	# of doses on record	3 dose	Alt. 2 dose schedule	# of doses on record	# of doses on record
Child 1	3/21/02	4/7/14					1	0	1	(3)	Chickenpox counts as having		2
Ch Please enter zeros if an immunization certificate is available and nothing is marked for a specific vaccination. Only if a certificate is not part of the child's school record, record DK (Don't Know) for a child's unknown shot history. This can happen with medical or religious exemptions in additional to No Certificate on File. This will help us to determine the difference							1	0	1	(3	Varicella doses, but we still woul- like to know if a child received a of the Varicella vaccine. Please	2)	CP+1
							0	0	1	0		d 1	1
							0	0	0	2		1	1
							0	1	1	(3		2	2
	between a true zero and missing records when analyzing the data.						1	0	1	(3		0 2	2
Ch							1	0	1	(3			СР
Child 8	ld 8 8/6/02 8/20/14						0	0	0	(3	dose of Varicella CP+2=child had	1	1
Child 9	7/31/02	8/14/13					1	0	1	(3	chickenpox and doses of Varicel	la 2	2
Child 10	9/30/02	DK					DΚ	DK	DK	DK	DK	DK	DK
Totals			7	1	1	1	5	1	7	7	+ 1 = 8	6	6

Each number represents the number of doses on the child's record for a particular vaccine. The circled numbers indicate that the child has received a particular count of doses appropriate for each vaccine (i.e., a completed DTaP vaccine series is 4 or more doses. Therefore, if the child has received 4 or more doses of DTaP, then circle those doses in the DTaP column). Count the number of circles in each column, and enter it into the row labeled 'Totals (Number of circles).

Enter these totals onto the School/Facility Annual Immunization Survey.